

# DRAFT

Lanarkshire NHS Board

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MEETING OF HEALTH AND CLINICAL GOVERNANCE COMMITTEE  
HELD ON MONDAY 18 FEBRUARY 2008 IN THE COMMITTEE ROOM,  
LANARKSHIRE NHS BOARD OFFICES, 14 BECKFORD STREET,  
HAMILTON.

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**PRESENT:** Mrs M Nelson, Non Executive Director (Chair)  
Mrs N Mahal, Non Executive Director  
Dr D McCormick, Non Executive Director

**IN ATTENDANCE:** Mr P K Corsar, NHS Board Chairman  
Dr A Graham, Medical Director  
Dr D C Moir, CBE, Director of Public Health  
Mr P Wilson OBE, Director for Allied Health Professions,  
Nursing and Midwifery  
Mrs C McGhee, Risk Manager  
Mr N J Agnew, Corporate Affairs Manager/  
Board Secretary (Secretariat)

**APOLOGIES** Mr D H Clark, Non Executive Director

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## 1. CHAIRMAN'S REPORT

Mrs Nelson reported on the principal elements of the programme for the National Clinical Governance Conference on 22 and 23 January 2008 which she had attended, when the theme of the first day had been Patient Safety and the second day The Patient Experience. She reported on key presentations, from: Peter Walsh, Chief Executive of Action Against Medical Accidents; Professor Huw Davies, on Achieving an Effective Culture; and Mr Ian Donald, on The Patient Experience. She reported, also, on the parallel sessions held on the first day of the Conference and the abstract sessions held on the second day of the Conference. She confirmed that all of the presentations given during the Conference could be accessed via the Medical Director's office.

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## 2. MINUTES

The Minute of the Meeting of the Committee held on 17 December 2007 was approved.

## 3. MATTERS ARISING FROM THE MINUTES

- i) **Framework for Review of Fatal Accident Inquiry Determinations, Ombudsman Reports and High Value Claims Settlements**

Dr Graham reported that expanding the remits and responsibilities of the Groups identified in the Framework was currently being taken forward with the Head of Patient Affairs. The product of this work would be brought to the Committee at its next meeting on 21 April 2008.

**Action: Dr Graham**

**ii) Health and Clinical Governance Strategy and Structures**

Dr Graham reported that the post of Head of Clinical Governance and Risk Management had been graded and was now out to advert. She explained that the appointee would have a key role in overseeing the implementation and operation of the Strategy and Structures, which she would bring to the next meeting of the Committee on 21 April 2008.

**Action: Dr Graham**

**iii) Clinical Governance Network**

Mrs Nelson reported that the next meeting of the Network, a Joint Meeting with Risk Management Network, was scheduled for Thursday 21 February 2008. She and Mrs Mahal were due to attend, and would report on the principal issues discussed at the next meeting of the Committee on 21 April 2008.

**Action: Mrs Nelson**

**iv) Business Continuity Planning**

The Committee considered an update report on Business Continuity Planning.

Dr Moir explained the further work in the area of Business Continuity Planning, including requests to departments to provide updates following a recommended template. She highlighted the rate of responses, to date, and confirmed her intention to raise this issue at the meeting of the Business Continuity Plan Steering Group on 19 February 2008, and at the subsequent meeting of the Corporate Management Team on 21 February 2008. She advised that she was also due to meet later in the month with the Director for Strategic Implementation, Planning and Performance, to discuss the further roll out of Business Continuity Planning. She suggested that progressing Business Continuity Planning should usefully build upon the substantial, and nationally acknowledged, progress in influenza pandemic planning. She highlighted a concern in relation to a lack of operational Risk Registers, and the view expressed by members of the Business Continuity Planning Steering Group that there was a desire for training in this area.

Dr Graham highlighted the incident involving interruption to the

electricity supply in the Monklands area on 25 January 2008, and confirmed that the Directors of the North and South Lanarkshire Community Health Partnership were jointly giving consideration to the lessons for Primary Care arising from that incident.

It was acknowledged that this was an area that required to be addressed, robustly, as it had been raised as an issue in the last NHS/QIS review, was now part of a HEAT target and was noted as an issue in the Annual Review by the Cabinet Secretary. Dr Moir would update the Committee further about progress in Business Continuity Planning at its next meeting on 21 April 2008.

**Action: Dr Moir**

v) **Action Plan – NHS QIS Report on Clinical Governance and Risk Management**

The Committee considered an Action Plan for advancing National Clinical Governance and Risk Management Standards in NHS Lanarkshire.

Mr Wilson spoke to the Action Plan, highlighting the key issues and the timescales for their completion. He confirmed that he was establishing an Action Team, with specific responsibility for overseeing the progress of the Action Plan. This would be the subject of progress reports in October and April each year, to the Committee, until its completion, with the next report to the Committee being due in October 2008. In the meantime, members were invited to submit any comments on the Action Plan to Mr Wilson.

**Action: Mr Wilson, Members**

The Committee considered the letter from the Cabinet Secretary summarising the main points and actions agreed during the discussion at the Annual Review and associated meetings on 19 November 2008, focussing, specifically, on the 2 key action points relative to Health and Clinical Governance, viz:

- Put in place robust arrangements to ensure the Local Delivery Plan identified key actions and how any risks to delivery will be mitigated in order to demonstrate required levels of progress towards achieving the NHS QIS Clinical Governance and Risk Management Standards.
- Continue to have evidence available in order to provide assurances with regard to the robustness of Clinical Governance and Risk Management arrangements.

Dr Graham reported that Mr Wilson would carry the lead responsibility in relation to the first key action point, the progress of which would be monitored through the performance management arrangements around the Local Delivery Plan and the HEAT targets. She confirmed that there would be an ongoing management focus to ensure that the

availability of evidence to provide assurances with regard to the robustness of Clinical Governance and Risk Management arrangements would continue.

Members noted that the proposed date for the 2008 Annual Review was 6 August 2008.

**vi) Health and Clinical Governance Annual Report 2006/2007**

Dr Graham confirmed that a draft of the Annual Report, drawing on contributions from key elements of the service, was currently being finalised, and would be circulated to members within the next week. The Annual Report would be submitted to the Board's Audit Committee and to the NHS Board.

**Action: Dr Graham**

Mrs Nelson indicated that the Annual Report would be used to inform the workplan for both the Health and Clinical Governance Committee and the Health and Clinical Governance Steering Group.

**vii) Patient Safety Programme**

The Committee considered a progress report on implementation of the Scottish Patient Safety Programme in NHS Lanarkshire, following its national launch on 14 – 16 January 2008.

Dr Graham highlighted the principal elements of the report, around the arrangements for overseeing the implementation of the 12 strands of the programme and the 5 key workstreams, viz: Medicine Management; Intensive Care; Leadership; Perioperative Care; and General Ward, each of which had Executive sponsorship. She highlighted the importance of "walk-rounds" by Executive Directors in the programme, and the inclusion of 20 case note reviews per month, per site. She confirmed that the Health and Clinical Governance Steering Group would monitor the implementation of the programme, with reports, as necessary, being brought to the Health and Clinical Governance Committee.

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**Action: Dr Graham**

Mrs McGhee reported that she was taking forward work to articulate clearly the roles envisaged for the key individuals with responsibility for implementation of the programme.

**viii) Research Governance**

Mr Agnew confirmed that resources continued to be available to fund necessary training for members of the Board's Research Ethics Committee.

**ix) Norovirus Outbreak – Hairmyres Hospital**

The Committee considered a report arising from the Incident Debrief, along with a draft NHS Lanarkshire HAI Incident and Outbreak Plan.

Dr Graham reported that the papers before the Committee had recently been considered and approved by the Corporate Management Team. She explained that the draft HAI Incident and Outbreak Plan was currently out for comment, and advised that some further clarity was required around the processes for the identification/declaration of an outbreak and its management. She advised that the co-ordination of comments on the draft plan, and providing further clarity in these key areas, sat with Dr Eleanor Anderson, Consultant in Public Health Medicine, who had chaired the Hairmyres Outbreak Team. She acknowledged the importance of clarifying issues around the leadership and management of the Infection Control Team, and confirmed that she was the Interim Lead for Infection Control, with Anne Armstrong carrying the lead management role for the Infection Control Team.

Dr Moir acknowledged the previous NHS QIS report on Healthcare Associated Infection. She reminded members that NHS QIS had visited Lanarkshire in October 2007, when NHS Lanarkshire had served as a pilot site for testing the new HAI Standards. She confirmed that, when available, the report of that visit would be brought to the Committee.

**Action: Dr Moir**

Mr Wilson confirmed that there was, in the main, a level of confidence about the process for managing Infection Control, but he acknowledged and stressed the key importance of clear leadership in this area.

Mrs McGhee undertook to pursue discussions with Dr Anderson, towards ensuring that the Implementation Plan included clarity about reporting lines.

**Action: Mrs McGhee**

**x) Medicines Management**

Dr Graham would take forward discussions with the Chief Pharmacist about the dates for the completion of the actions set out within the Action Plan.

**Action: Dr Graham**

**xi) Clinical Indicators Report 2007**

The Committee considered a paper on the principal issues for Lanarkshire arising from the Clinical Indicators Report 2007.

Dr Moir explained that the Clinical Indicators Report presented data on 3 Long Term Conditions, viz: Depression; Arthritis and Upper Gastrointestinal Conditions, and included, in particular, indicators on

consultations with General Practice and Prescribing in the Community. She outlined the principal issues in relation to each of the Long Term Conditions, and confirmed in relation to Depression, that prescribing of anti-depressants, as part of an overall review of repeat prescribing, was ongoing. She reported that there was currently an evidence base for the use of psychological therapies as the first line of treatment for those suffering from mild depression, and a lack of individuals trained to provide these psychological therapies. She confirmed that the Clinical Indicators report was being utilised locally to help inform the further responses to the issues highlighted in relation to Depression; Arthritis and Upper Gastrointestinal conditions.

**xii) Review of Accident and Emergency Services**

Members noted that a response from the Cabinet Secretary for Health and Wellbeing to the recommendations submitted to her following the meeting of the NHS Board on 30 January 2008, was awaited.

There was recognition of the need for a manpower plan in relation to the retention of 3 Emergency Care sites in Lanarkshire, and it was noted that this would form part of the further iteration of the Workforce Plan to be considered by the NHS Board in April 2008.

**4. FOOD, FLUID AND NUTRITIONAL CARE**

The Committee considered an update report on the Food, Fluid and Nutritional Care Strategic Plan.

The Director for Allied Health Professions, Nursing and Midwifery explained that the report provided an update on: progress against the Food, Fluid and Nutritional Care Action Plan approved by the NHS Board in November 2007; a summary of the results of the most recent Food, Fluid and Nutritional Care Audit; and draft objectives for 2008/2009. He highlighted progress in relation to the standards within the Strategic Plan, viz: Policy and Strategy; Assessment, Screening and Care Planning; Planning and Delivery of Food and Fluid; Provision of Food and Fluid to Patients; Patient Information and Communication, and Education and Training for Staff. He also highlighted the key results of the Audit, around: Weighing Equipment; Nutritional Screening; Named Nutrition Link Nurses; and Nutritional Status recorded on Discharge Plan. He stressed the element of the Audit focussing on the Patient Experience, and confirmed that this would be concluded by the end of March 2008. He also confirmed that protected meal times for patients would shortly be introduced, and that the use of appropriately trained volunteers to support staff was currently under consideration.

Members noted the report on progress in the implementation of the Action Plan and the summary of results of the Audit, along with the draft objectives for 2008/2009, viz: repeat Nutritional Screening Audit following training programme; implementation of protected meal times; implementing meaningful public partnership involvement in Food, Fluid and Nutritional

Care; improving the quality and choice of therapeutic meals; undertaking a nutritional training needs analysis; updating the Action Plan on completion of the Patient Focussed Audit; and standardising the prescribing of dietary supplements. Members noted, also, that the next steps would involve the finalisation of the objectives for 2008/2009, and their incorporation into the 2008/2009 Corporate Objectives.

#### **5. LOCAL SUPERVISING AUTHORITY LANARKSHIRE: ANNUAL REPORT APRIL 2006 – MARCH 2007**

The Committee considered the Local Supervising Authority Annual Report 2006/2007.

Mr Wilson highlighted the principal elements of the report. He explained that the Local Supervising Authority was responsible for ensuring that the statutory function for the supervision of Midwives and Midwifery Practice was carried out to a satisfactory level for all Midwives working within its boundaries. He advised that the report had been produced to meet the requirements of the Midwives' rules and standards, as published by the Nursing and Midwifery Council 2004, and aimed to demonstrate how the LSA and the Lanarkshire NHS Board met the NMC Standards, a copy of which was tabled for members. Mr Wilson highlighted the principal elements of the Annual Report.

In discussion, he gave an indication of the incidence of home births within Lanarkshire, and the general approach to their management.

#### **6. CHILD PROTECTION**

Members noted that a major Board Seminar on Child Protection, including the arrangements for the HMIE Inspection of Child Protection Services, had been held on 8 February 2008, and that a further progress report on arrangements for the HMIE Inspection would be considered by the NHS Board at its meeting on 27 February 2008.

Mr Wilson explained that as part of the Inspection, Inspectors would review approximately 66 Child Protection case records for each of North and South Lanarkshire. He advised that as part of the Child Protection management arrangements he met bi-annually with the Child Protection Teams, when the issues under consideration included a Review of Critical Incidents.

#### **7. POTENTIAL FATAL ACCIDENT INQUIRY**

Dr Graham highlighted a potential Fatal Accident Inquiry arising from a Critical Incident involving a completed suicide by an individual who had been known to the Addictions Team. She advised that the Critical Incident Review would result in the production of an Action Plan, which would be the subject of a report to a future meeting of the Committee.

**Action: Dr Graham**

## **8. MINUTES OF MEETINGS**

The Committee considered Minutes of Meetings of the Health and Clinical Governance Steering Group and the Risk Management Steering Group, as undernoted:

### **a) Health and Clinical Governance Steering Group – 26 November 2007**

Dr Graham advised that NHS QIS were due to visit Lanarkshire in March to review the progress of Surgical Profiles work, and undertook to update the Committee on the outcome at its next meeting in April 2008.

**Action: Dr Graham**

### **b) Risk Management Steering Group – 4 February 2008**

Mrs McGhee explained the rationale for undertaking a legislative compliance stocktake, and confirmed that she would progress this work with the Head of Performance Management, with relevant Health and Clinical Governance issues being brought to the Committee.

**Action: Mrs McGhee**

## **9. ANY OTHER COMPETENT BUSINESS**

### **a) NHS QIS Inspection of Blood Transfusion Services**

Dr Graham reported that NHS QIS would visit Lanarkshire on 21 February 2008 to review Blood Transfusion Services, and confirmed that she would bring the review report to the Committee in due course.

**Action: Dr Graham**

## **10. DATE OF NEXT MEETING**

Monday 21 April 2008 at 1.30 pm.

NJA/OD  
19 February 2008